

## Travel & Expense Account Summary

Employee Name                      KIMBERLY BELSHE  
Expense Dates                      06/09/10-06/10/10  
Report Name                        Washington, DC

**Request Total**    \$      401.77  
**Direct Charge Total**   -      0.00  
**Travel Advances**     -      0.00  
**Net Due Employee**   =      401.77

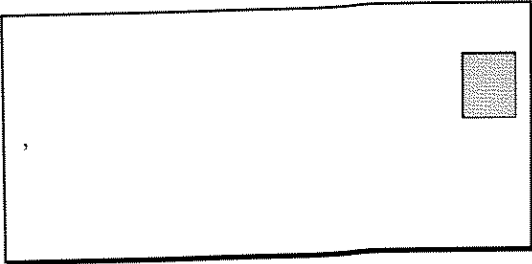
| Trip Totals           |                |              |
|-----------------------|----------------|--------------|
| Trip/Expense Category | Trip Name      | Total Amount |
| Regular Travel        | DC trip 6.9.10 | 401.77       |

NOTE: (d)=Direct Charge

| DATE                         | Wed<br>Jun 9  | Thu<br>Jun 10 | Thu<br>Jun 10 |  |  |  |  |  |  | TOTAL         |
|------------------------------|---------------|---------------|---------------|--|--|--|--|--|--|---------------|
| O/S Lodging                  | 258.77        |               |               |  |  |  |  |  |  | 258.77        |
| O/S Taxi Fare                | 11.00         | 11.00         | 75.00         |  |  |  |  |  |  | 97.00         |
| O/S Breakfast                |               | 6.00          |               |  |  |  |  |  |  | 6.00          |
| O/S Lunch                    |               | 10.00         |               |  |  |  |  |  |  | 10.00         |
| O/S Dinner                   |               | 18.00         |               |  |  |  |  |  |  | 18.00         |
| O/S Mileage<br>Personal Auto |               | 6.00          | 6.00          |  |  |  |  |  |  | 12.00         |
| <b>TOTALS \$</b>             | <b>269.77</b> | <b>51.00</b>  | <b>81.00</b>  |  |  |  |  |  |  | <b>401.77</b> |

**Travel & Expense Account  
Transmittal Sheet**

After Approval, Mail Receipts To



|                      |                   |
|----------------------|-------------------|
| Employee Name        | BELSHE, KIMBERLY  |
| Expense Dates        | 06/09/10-06/10/10 |
| Total Expense Amount | 401.77            |
| Amount Due Employee  | 401.77            |
| Form ID              | TEA000699780      |

**DIRECTIONS FOR SUBMISSION**

1. Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.

|    | Date  | Expense Item  | Amount | If not submitted - Explain |
|----|-------|---------------|--------|----------------------------|
| 1) | 06/09 | O/S Lodging   | 258.77 |                            |
| 2) | 06/09 | O/S Taxi Fare | 11.00  |                            |
| 3) | 06/10 | O/S Taxi Fare | 11.00  |                            |
| 4) | 06/10 | O/S Taxi Fare | 75.00  |                            |

2. Forward Transmittal Sheet and attached documentation through your approval process.

| CLAIM EXCEPTION(S) |                  |  |          |
|--------------------|------------------|--|----------|
|                    | Item             | Exception  | Response |
| 1)                 | #A6 DPA required | Document of Prior Approval required for Out of State Travel. | Yes      |

I have reviewed the following documents.

Approved by: \_\_\_\_\_  
SONIA P FERNANDEZ-HERRERA

## Travel & Expense Account Summary

Employee Name                      KIMBERLY BELSHE  
Expense Dates                      06/09/10-06/26/10  
Report Name                        Attend various offsite meetings

Request Total    \$        141.50  
Direct Charge Total   -        0.00  
Travel Advances   -        0.00  
Net Due Employee   =        **141.50**

| Trip Totals           |                |              |
|-----------------------|----------------|--------------|
| Trip/Expense Category | Trip Name      | Total Amount |
| Regular Travel        | CLI Graduation | 134.00       |
| Regular Travel        | IHSS meeting   | 7.50         |

NOTE: (d)=Direct Charge

| DATE          | Wed<br>Jun 9 |  |  |  |  |  |  |  |  | TOTAL |
|---------------|--------------|--|--|--|--|--|--|--|--|-------|
| Parking, Auto | 7.50         |  |  |  |  |  |  |  |  | 7.50  |
| TOTALS \$     | 7.50         |  |  |  |  |  |  |  |  | 7.50  |

| DATE                      | Sat<br>Jun 26 |  |  |  |  |  |  |  |  | TOTAL  |
|---------------------------|---------------|--|--|--|--|--|--|--|--|--------|
| Bridge Tolls              | 8.00          |  |  |  |  |  |  |  |  | 8.00   |
| Parking, Auto             | 36.00         |  |  |  |  |  |  |  |  | 36.00  |
| Mileage,<br>Personal Auto | 90.00         |  |  |  |  |  |  |  |  | 90.00  |
| TOTALS \$                 | 134.00        |  |  |  |  |  |  |  |  | 134.00 |

**Travel & Expense Account  
Transmittal Sheet**

**After Approval, Mail Receipts To**

|                      |                          |
|----------------------|--------------------------|
| Employee Name        | <u>BELSHE, KIMBERLY</u>  |
| Expense Dates        | <u>06/09/10-06/26/10</u> |
| Total Expense Amount | <u>141.50</u>            |
| Amount Due Employee  | <u>141.50</u>            |
| Form ID              | <u>TEA000706465</u>      |

**DIRECTIONS FOR SUBMISSION**

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

| Date     | Expense Item  | Amount | If not submitted - Explain |
|----------|---------------|--------|----------------------------|
| 1) 06/26 | Parking, Auto | 36.00  |                            |

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

| TRIP EXCEPTION(S) |      |  |          |
|-------------------|------|--|----------|
|                   | Item | Exception  | Response |
| 1)                | 4:1  | Travel was less than 50 miles from home/HQ. Has prior written approval been granted? | Yes      |

I have reviewed the following documents.

Approved  
by:

\_\_\_\_\_  
SONIA P FERNANDEZ-HERRERA

## Travel & Expense Account Summary

|               |                          |                     |        |
|---------------|--------------------------|---------------------|--------|
| Employee Name | KIMBERLY BELSHE          | Request Total \$    | 44.00  |
| Expense Dates | 06/01/10-06/08/10        | Direct Charge Total | - 0.00 |
| Report Name   | Various offsite meetings | Travel Advances     | - 0.00 |
|               |                          | Net Due Employee =  | 44.00  |

| Trip Totals    | Trip/Expense Category | Trip Name   | Total Amount |
|----------------|-----------------------|-------------|--------------|
| Regular Travel |                       | GO mtgs.    | 15.50        |
| Regular Travel |                       | GO meetings | 12.00        |
| Regular Travel |                       | HCR Meeting | 12.00        |
| Regular Travel |                       | GO meeting  | 4.50         |

NOTE: (d)=Direct Charge

| DATE          | Tue<br>Jun 1 |  |  |  |  |  |  |  |  | TOTAL |
|---------------|--------------|--|--|--|--|--|--|--|--|-------|
| Parking, Auto | 4.50         |  |  |  |  |  |  |  |  | 4.50  |
| TOTALS \$     | 4.50         |  |  |  |  |  |  |  |  | 4.50  |

| DATE          | Wed<br>Jun 2 |  |  |  |  |  |  |  |  | TOTAL |
|---------------|--------------|--|--|--|--|--|--|--|--|-------|
| Parking, Auto | 12.00        |  |  |  |  |  |  |  |  | 12.00 |
| TOTALS \$     | 12.00        |  |  |  |  |  |  |  |  | 12.00 |

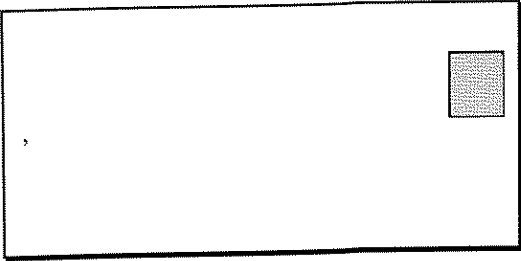
| DATE          | Fri<br>Jun 4 |  |  |  |  |  |  |  |  | TOTAL |
|---------------|--------------|--|--|--|--|--|--|--|--|-------|
| Parking, Auto | 12.00        |  |  |  |  |  |  |  |  | 12.00 |
| TOTALS \$     | 12.00        |  |  |  |  |  |  |  |  | 12.00 |

# Travel & Expense Account Summary

| DATE         | Tue<br>Jun 8 |  |  |  |  |  |  |  |  | TOTAL |
|--------------|--------------|--|--|--|--|--|--|--|--|-------|
| arking, Auto | 15.50        |  |  |  |  |  |  |  |  | 15.50 |
| TOTALS \$    | 15.50        |  |  |  |  |  |  |  |  | 15.50 |

**Travel & Expense Account  
Transmittal Sheet**

**After Approval, Mail Receipts To**



|                      |                   |
|----------------------|-------------------|
| Employee Name        | BELSHE, KIMBERLY  |
| Expense Dates        | 06/01/10-06/08/10 |
| Total Expense Amount | 44.00             |
| Amount Due Employee  | 44.00             |
| Form ID              | TEA000706455      |

**DIRECTIONS FOR SUBMISSION**

1. *Attach the following receipts, and other appropriate documentation to this Transmittal Sheet.*

| Date     | Expense Item  | Amount | If not submitted - Explain |
|----------|---------------|--------|----------------------------|
| 1) 06/02 | Parking, Auto | 12.00  |                            |
| 2) 06/04 | Parking, Auto | 12.00  |                            |
| 3) 06/08 | Parking, Auto | 15.50  |                            |

2. *Forward Transmittal Sheet and attached documentation through your approval process.*

| TRIP EXCEPTION(S) |      |  |          |
|-------------------|------|--|----------|
|                   | Item | Exception  | Response |
| 1)                | 4:1  | Travel was less than 50 miles from home/HQ. Has prior written approval been granted? | Yes      |
| 2)                | 4:1  | Travel was less than 50 miles from home/HQ. Has prior written approval been granted? | Yes      |
| 3)                | 4:1  | Travel was less than 50 miles from home/HQ. Has prior written approval been granted? | Yes      |
| 4)                | 4:1  | Travel was less than 50 miles from home/HQ. Has prior written approval been granted? | Yes      |

I have reviewed the following documents.

**Travel & Expense Account  
Transmittal Sheet**

Approved  
by:

\_\_\_\_\_  
**SONIA P FERNANDEZ-HERRERA**